

___ Kate
___ EZ Care
___ Janet

RF

2013 - 2014

**BEDFORD RECREATION KIDS' CLUB
SCHOOL AGE CHILD CARE REGISTRATION FORM**

Additional forms will have to be completed after June 1st.

Due to regulations, additional required forms cannot be completed until after June 1st. After June 1st, these forms can be obtained from our website. If you'd like a hard copy of these forms instead, check here ☐.

Child's Name: _____ **Preferred Name:** _____

Date of Birth: _____ **Gender:** _____ **Grade Entry 9/2013:** _____ **Age as of 9/2013:** _____

Street: _____ **Town:** _____ **State:** _____ **Zip Code:** _____

Home Telephone: _____

Parent/Guardian #1: _____ **Relationship to Child:** _____

Street: _____ **Town:** _____ **State:** _____ **Zip Code:** _____

Home Phone: _____ **Work Phone:** _____

Cell Phone: _____ **E-Mail:** _____

Parent/Guardian #2: _____ **Relationship to Child:** _____

Street: _____ **Town:** _____ **State:** _____ **Zip Code:** _____

Home Phone: _____ **Work Phone:** _____

Cell Phone: _____ **E-Mail:** _____

Marital Status of Parents (if not same address): _____

Non-refundable Registration/Processing Fee due with form: \$50

☐ Charge fee to MasterCard or Visa. Call Bedford Recreation Department (781-275-1392)

☐ Check included with form. Please make all checks payable to: Town of Bedford.

Receipt Request

☐ Check for monthly receipt for reimbursement purposes.

☐ Check for year-end receipt only for tax purposes.

You may FAX (781-275-4882) this form only if using MasterCard or Visa as payment.

Parent Signature

Date